

JUN 09 2005

FAX TRANSMISSION**DATE:** June 9, 2005**PTO IDENTIFIER:** Application Number 10/649,951-Conf. #6259
Patent Number**Inventor:** Dana V. Ferraris et al.**MESSAGE TO:** US Patent and Trademark Office**FAX NUMBER:** (703) 872-9306**FROM:** CONNOLLY BOVE LODGE & HUTZ LLP
Mark J. Pino**PHONE:** (202) 331-7111**Attorney Dkt. #:** 22227-00003-US2**PAGES (Including Cover Sheet):** 16**CONTENTS:**

Certificate of Transmission (1 page)
Transmittal (1 page)
Fee Transmittal Form (1 page)
One Month Request for Extension of Time Under 37 CFR 1.136(a) (2 pages, Orig. + dup.)
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Amendment in Response to Non-Final Office Action (10 pages)

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PTO/SB/97 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

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Application No. (if known): 10/649,951

Attorney Docket No.: 22227-00003-US2

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on June 9, 2005
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Transmittal (1 page)

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One Month Request for Extension of Time Under 37 CFR 1.136(a) (2 pages,

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PTO/SB/17 (12-04v2)

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). <h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">For FY 2005</h3>		Complete if Known	
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	10/649,951-Conf. #6259
		Filing Date	August 28, 2003
		First Named Inventor	Dana V. Ferraris
		Examiner Name	Raymond K. Covington
		Art Unit	1825
TOTAL AMOUNT OF PAYMENT (\$) 60.00		Attorney Docket No.	22227-00003-US2

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>22-0185</u> Deposit Account Name: <u>Connolly Bove Lodge & Hutz LLP</u>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments	

FEE CALCULATION																			
1. BASIC FILING, SEARCH, AND EXAMINATION FEES																			
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)												
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)													
Utility	300	150	500	250	200	100													
Design	200	100	100	50	130	65													
Plant	200	100	300	150	160	80													
Reissue	300	150	500	250	600	300													
Provisional	200	100	0	0	0	0													
							Small Entity Fee (\$) Fee (\$)												
2. EXCESS CLAIM FEES																			
Fee Description																			
Each claim over 20 (including Reissues)							50 25												
Each independent claim over 3 (including Reissues)							200 100												
Multiple dependent claims							360 180												
<table style="width: 100%;"> <tr> <th>Total Claims</th> <th>Extra Claims</th> <th>Fee (\$)</th> <th>Fee Paid (\$)</th> <th colspan="2">Multiple Dependent Claims</th> </tr> <tr> <td>_____ - 20 = _____</td> <td>x _____</td> <td>= _____</td> <td>_____</td> <td>Fee (\$)</td> <td>Fee Paid (\$)</td> </tr> </table>							Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims		_____ - 20 = _____	x _____	= _____	_____	Fee (\$)	Fee Paid (\$)	
Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims															
_____ - 20 = _____	x _____	= _____	_____	Fee (\$)	Fee Paid (\$)														
<table style="width: 100%;"> <tr> <th>Indep. Claims</th> <th>Extra Claims</th> <th>Fee (\$)</th> <th>Fee Paid (\$)</th> </tr> <tr> <td>_____ - 3 = _____</td> <td>x _____</td> <td>= _____</td> <td>_____</td> </tr> </table>							Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	_____ - 3 = _____	x _____	= _____	_____					
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)																
_____ - 3 = _____	x _____	= _____	_____																
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).																			
<table style="width: 100%;"> <tr> <th>Total Sheets</th> <th>Extra Sheets</th> <th>Number of each additional 50 or fraction thereof</th> <th>Fee (\$)</th> <th>Fee Paid (\$)</th> </tr> <tr> <td>_____ - 100 = _____</td> <td>/60</td> <td>_____ (round up to a whole number) x _____</td> <td>= _____</td> <td>Fees Paid (\$)</td> </tr> </table>							Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)	_____ - 100 = _____	/60	_____ (round up to a whole number) x _____	= _____	Fees Paid (\$)			
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)															
_____ - 100 = _____	/60	_____ (round up to a whole number) x _____	= _____	Fees Paid (\$)															
4. OTHER FEE(S)																			
Non-English Specification, \$130 fee (no small entity discount)							60.00												
Other (e.g., late filing surcharge): 2251 Extension for response within first month																			

SUBMITTED BY		Registration No. 43,858	Telephone (202) 331-7111
Signature	(Attorney/Agent)	Date June 9, 2005	
Name (Print/Type) Mark J. Pino			

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Application No.: 10/649,951

Docket No.: 22227-00003-US2
(PATENT)**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Patent Application of:

Jia-He LI et al.

Application No.: 10/649,951

Confirmation No.: 6259

Filed: August 28, 2003

Art Unit: 1625

For: SYMMETRICALLY DISUBSTITUTED
AROMATIC COMPOUNDS AND
PHARMACEUTICAL COMPOSITIONS FOR
INHIBITING POLY (ADP-RIBOSE)
GLYCOHYDROLASE, AND METHODS FOR
THEIR USE

Examiner: R. K. Covington

AMENDMENT IN RESPONSE TO NON-FINAL OFFICE ACTION

MS Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

INTRODUCTORY COMMENTS

In response to the Office Action of February 9, 2005, please reconsider the above-identified application in view of the Amendments that begin on page 2 of this paper.

Amendments to the Claims begin on page 2 of this paper.

Remarks/Arguments begin on page 6 of this paper.